



**VA ELECTRONIC HEALTH RECORD MODERNIZATION  
(EHRM) SYSTEM  
PERFORMANCE WORK STATEMENT (PWS)  
DEPARTMENT OF VETERANS AFFAIRS**

**Office of Electronic Health Record Modernization**

**EHRM Functional Baseline Design and Development**

**Date: September 18, 2018**

**TAC- 18-51997**

**Task Order PWS Version Number: 2.5**

# EHRM Functional Baseline Design and Development

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## **1.0 BACKGROUND**

The mission of the Department of Veterans Affairs (VA) is to provide benefits and services to Veterans of the United States. In meeting these goals, VA strives to provide high quality, effective, and efficient Information Technology (IT) services to those responsible for providing care to the Veterans at the point-of-care as well as throughout all the points of the Veterans' health care in an effective, timely and compassionate manner. VA depends on Information Management/Information Technology (IM/IT) systems to meet mission goals.

On June 1, 2017, the Secretary of the VA signed a Determination and Findings that, through a public interest exception, permitted the sole source procurement of the Cerner Corporation's (Cerner) Electronic Health Record (EHR) system being deployed by the Department of Defense (DoD) as well as related services for deployment and transition across the VA enterprise in a manner that meets VA needs. Procurement of a single common system across VA and DoD shall achieve VA's goal of seamless care for Veterans by facilitating the transition of active duty military members to VA and improving their timely access to the highest quality of care.

Under this task order, Cerner shall provide support in designing and developing VA-specific functional frameworks required for VA to enable successful IOC deployment.

For purposes of this Performance Work Statement (PWS), the VA EHR solution will be referred to as the VA Electronic Health Record Modernization (EHRM) System.

## **2.0 APPLICABLE DOCUMENTS**

The documents in Paragraph 3.0 in the EHRM Basic PWS apply to the performance of this effort, there are no additional referenced documents.

## **3.0 SCOPE OF WORK**

The Contractor shall provide functional baseline design and development support services for the VA EHRM solution. Functional baseline tasks include:

- a. Project management
- b. Workflow, training and change management
- c. Value management
- d. EHRM stakeholder communications

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### **3.1 APPLICABILITY**

This Task Order (TO) PWS is within the scope of paragraph 5.5 VA Enterprise EHRM Baseline Preparation of the EHRM Basic PWS.

### **3.2 ORDER TYPE**

The effort shall be proposed on a Firm Fixed Price (FFP) basis.

## **4.0 PERFORMANCE DETAILS**

### **4.1 PERFORMANCE PERIOD**

The period of performance (PoP) shall be 12 months from the date of award, with one 12-month option period and one optional task.

### **4.2 PLACE OF PERFORMANCE**

Efforts under this TO shall be performed both in Contractor facilities, as well as VA facilities. Program meetings may also be held at VA Central Office, some of which may require in person attendance. Project management activities that occur at the enterprise level shall be performed at Contractor facilities.

### **4.3 TRAVEL OR SPECIAL REQUIREMENTS**

The Government anticipates travel under this effort to support program-related meetings for Functional Baseline Design and Development throughout the period of performance. Include all estimated travel costs in your firm-fixed price line items. These costs will not be directly reimbursed by the Government.

The total estimated number of trips for this effort shall be proposed by the Contractor.

### **4.4 CONTRACT MANAGEMENT**

All requirements of Section 9.0 of the EHRM Basic PWS apply to this effort. This TO shall be addressed in the Contractor's Monthly Progress Report as set forth in the EHRM Basic contract.

### **4.5 GOVERNMENT FURNISHED PROPERTY**

Based on the Government assessment of remote access solutions and the requirements of this TO, the Government estimates that the following GFE will be required by this TO:

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1. 25 standard laptops
2. 5 developer laptops

The Government will not provide IT accessories including, but not limited to, Mobile Wi-Fi hotspots/wireless access points, additional or specialized keyboards or mice, laptop bags, extra charging cables, extra PIV readers, peripheral devices, additional RAM, etc. The Contractor is responsible for providing these types of IT accessories in support of the TO as necessary and any VA installation required for these IT accessories shall be coordinated with the COR.

### 4.6 SECURITY AND PRIVACY

All requirements in Section 7.0 of the EHRM Basic PWS apply to this effort.

It has been determined that protected health information may be disclosed or accessed and a signed Business Associate Agreement (BAA) shall be required. The Contractor shall adhere to the requirements of the BAA executed between Cerner Corporation and the OEHRM; and shall comply with VA Directive 6066 and VHA Handbook 1605.05.

#### 4.6.1 POSITION/TASK RISK DESIGNATION LEVEL(S)

The position sensitivity and the level of background investigation commensurate with the required level of access for the following tasks within the PWS are:

#### Position Sensitivity and Background Investigation Requirements by Task

Task Number	Tier1 / Low Risk	Tier 2 / Moderate Risk	Tier 4 / High Risk
5.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.3	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.5	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.6	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

The Tasks identified above and the resulting Position Sensitivity and Background Investigation requirements identify, in effect, the Background Investigation requirements for Contractor individuals, based upon the tasks the particular Contractor individual will be working. The submitted Contractor Staff Roster must indicate the required Background Investigation Level for each Contractor individual based upon the tasks the Contractor individual will be working, in accordance with their submitted proposal.

## **5.0 SPECIFIC TASKS AND DELIVERABLES**

The Contractor shall perform the following:

### **5.1 PROJECT MANAGEMENT**

#### **5.1.1 CONTRACTOR PROJECT MANAGEMENT PLAN**

The Contractor shall deliver a Contractor Project Management Plan (CPMP) that lays out the Contractor's approach, timeline and tools to be used in execution of this TO effort. The CPMP should take the form of both a narrative and graphic format that displays the schedule, milestones, risks and resource support. The CPMP shall also include how the Contractor shall coordinate and execute planned, routine, and ad hoc data collection reporting requests as identified within the PWS. The initial baseline CPMP shall be concurred upon and updated in accordance with Section B of the TO. The Contractor shall update and maintain the VA Program Manager (PM) approved CPMP throughout the PoP.

**Deliverable:**

- A. Contractor Project Management Plan

#### **5.1.2 REPORTING REQUIREMENTS**

The Contractor shall support information and data call requests to include presentations, talking points, and other written materials to respond to information requests from OEHRM and VHA leadership. Support required for information requests shall include compilation of relevant information into logical and concise formats. This includes point papers, detailed reports, data tables, graphs, creation of complex graphics and integration of these depictions into both narrative and briefing formats.

The Contractor shall provide a Monthly Progress Report in accordance with Section 9.6.1.1 of the EHRM Basic PWS.

**Deliverable:**

- A. Monthly Progress Report

#### **5.1.3 TECHNICAL KICKOFF MEETING**

The Contractor shall hold a technical kickoff meeting within 30 days after TO award. The Contractor shall present, for review and approval by the Government, the details of the intended approach, work plan, and project schedule for each effort. The Contractor shall specify dates, locations (can be virtual), agenda (shall be provided to all attendees at least five calendar days prior to the meeting), and meeting minutes (shall be provided

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to all attendees within three calendar days after the meeting). The Contractor shall invite the Contracting Officer (CO), Contract Specialist (CS), COR, and the VA PM.

### **5.2 WORKFLOW, TRAINING, AND CHANGE MANAGEMENT TAILORING TO VA**

The Contractor shall execute the tasks supporting functional baseline development that are defined in the following strategies and plans developed and maintained under the EHRM Project Management, Planning, Strategy and Pre-IOC Task Order (PM TO 01).

- a. PM TO 01 paragraph 5.3.2: Change Management Strategy
- b. PM TO 01 paragraph 5.3.3: Training Strategy
- c. PM TO 01 paragraph 5.3.4: Stakeholder Communication Strategy and Plan
- d. PM TO 01 paragraph 5.3.5: Workflow Development, Configuration and Normalization Plan
- e. PM TO 01 paragraph 5.3.6: Deployment Management Strategy
- f. PM TO 01 paragraph 5.3.7: Value Realization Strategy
- g. PM TO 01 paragraph 5.3.8: Applied Informatics Institute (All) Strategy (Note: All has been renamed to VA Innovative Technology Advancement Lab (VITAL))
- h. PM TO 01 paragraph 5.4.9: Configuration Management Plan
- i. PM TO 01 paragraph 5.4.10: Master Test Plan

These Plans and Strategies are updated monthly by the Contractor as required by the PM TO 01. Additional activities added to these plans and strategies during the period of performance may be deemed by the parties to be outside of the originally contemplated scope, the Contractor may coordinate with VA on using Optional Task 5.5.

#### **5.2.1 WORKFLOW DEVELOPMENT AND NORMALIZATION**

The Contractor shall execute the Workflow Development, Configuration and Normalization Plan. The Contractor shall:

- a. Configure new workflows to meet VA-specific requirements as appropriate under direction of OEHRM Chief Medical Officer.
- b. Identify and document gaps and recommendations for workflow differences:
  - i. Between locations of VA implementations
  - ii. Between DoD and VA
- c. Propose and implement a methodology for continued synchronization of workflows internally to VA and between DoD and VA.
- d. Propose, plan and implement methodology to address Cerner upgrades, synchronization of workflows and coordination with VA
- e. Participate in joint governance and change control

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- f. Support robust semantic modeling for the data associated with those workflows. Note: VA and its agents shall have unlimited rights to all models and algorithms developed by the Contractor at VA expense.
- g. Support modeling and storage of data associated with workflows, which modeling shall be based on analytical algorithms and data models (1) developed by the Contractor, (2) co-developed by the Contractor in coordination with the VA health organizations and the community, (3) developed by VA health organizations, or (4) provided by third-party developers. The VA and its agents shall have unlimited rights to all algorithms and logic models developed by Contractor at VA expense.
- h. Encapsulate workflows into platform-independent (to the extent possible), standards-based, modeled clinical processes and pathways.
- i. Provide content management oversight as well as tools to generate and curate workflow data.
- j. Provide traceability matrix of the RTM functional requirements to EHRM enterprise workflows. Provide traceability matrix as applicable of any non-functional requirement to the EHRM enterprise workflows.
- k. The Contractor shall provide clinical subject matter experts to support design and build of best practice, standardized workflows, and to share lessons learned from commercial and public sectors for each of the 18 VA EHR Councils, or as otherwise agreed upon.

The Contractor shall report on workflow development status, issues and risks in a monthly workflow status report covering all efforts described above.

### **Deliverables:**

- A. Monthly Workflow Status Report

## **5.2.2 TRAINING MATERIALS AND ACCESS**

The Contractor shall initiate execution of the Training Strategy by creating EHRM Training Materials including curriculums, content, delivery mechanisms, schedules and supporting media for VA review and concurrence. The Contractor shall:

- a. Provide VA access to high-level overviews of EHRM functionality and user interfaces to familiarize future users with system capabilities.
- b. Provide VA EHR Council access to Cerner commercial training environments as required to provide insight to baseline Millennium workflows.
- c. Integrate training plan, materials and schedule with the deployment timeline.



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- d. Include clinical training plans, materials and schedule tailored to the modules comprising the VA EHRM solution.
- e. Include technical training plans, materials and schedule tailored to the technical needs of the local IT support staff and the VA testing staff.
- f. Coordinate with VA to leverage VA SIM center strategies and/or capabilities
- g. Develop and deliver comprehensive, Role-Tailored Course Curriculum and training materials to the localized business process and future state workflows of the care team, including prioritized SOPs and KPIs by role and task in collaboration with the VA. The Curriculum and training materials shall include such items as:
  - i. A role-tailored training course curriculum which will include input from VA Training subject matter experts
  - ii. Coordination with VA to design user roles, privileges, and other related access
  - iii. Assessment of existing VA role provisioning and performance of detailed role mapping workshops/exercises to provision roles to VA users
  - iv. Training to VA on Cerner roles and the role mapping process.
- h. Plan a role-tailored training course curriculum which will include input from VA Training subject matter experts.
- i. Provide training workflows which support the following methods of training at a minimum:
  - i. Instructor-led Training (Classroom)
  - ii. Digital Media (Computer Based Training, VA hosted Tip Sheets, etc.)
  - iii. Over-the-shoulder Training
- j. Support remote document collaboration to facilitate knowledge management and change management via SharePoint. The Contractor shall:
  - i. Provide VA access to Cerner's knowledge management systems as required
  - ii. Provide VA with documents or links to enable VA to effectively manage EHRM knowledge
- k. Create and load a training domain to mirror the configured VA production domain.
- l. Provide VA access to the training domain for training of clinical users as well as VA testing Team, local OI&T support, Biomed and other non-clinical system users.
- m. Support continuing education and new employee training including topics such as EHR, analytics and HealthIntent
- n. Provide EHRM training materials to the VA Education Group to be loaded in the VA-approved training system

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- i. Training content shall be provided in Aviation Industry Computer Based Training Committee (AICC) or Sharable Content Object Reference Model (SCORM) format
  - ii. Content shall be certified as 508 compliant
- o. Provide materials that describe the EHRM security mechanisms (VIP levels, org codes, psychiatric PHI, etc.) and how they are applied to patient encounters and end users.

The Contractor shall report status, issues and risks in a Monthly Training Materials and Access Status Report covering all efforts described above.

### **Deliverables:**

- A. Training Plans and Materials
- B. Role-Tailored Course Curriculum
- C. Monthly Training Materials and Access Status Report

### **5.2.3 VA INNOVATIVE TECHNOLOGY ADVANCEMENT LAB (VITAL)**

The Contractor shall initiate execution of the VITAL Strategy delivered through the PM TO 01 Paragraph 5.4. The Contractor shall create the VITAL, to include:

- a. Coordinate and integrate agreed upon scope into EHRM workstreams and in concert with existing related VA programs.
- b. Modify and integrate Contractor courses into approved VA curricula, aligned to objectives, scope, and role (audience).
- c. Implement marketing and communications plan to inform and coordinate with target leaders, managers, staff, stakeholders and participants.
- d. Track and report number of participants to inform staff education needs, and operational planning including hiring of facilitators, support staff, technical support, content developers, etc.
- e. Determine facilities and delivery locations, and coordinate with VA to capture travel and other cost and finance implications impacting VA.
- f. Coordinate with VA to adapt approved supporting learning technology components necessary to support optimal human-learning across a diverse and widely-dispersed workforce.
- g. Develop institute branding and partnerships, through collaboration with VA.
- h. Document VITAL course status in an Enrollment, Completion, and Satisfaction Report for each course conducted.
- i. Include a role provisioning training plan and materials covering the following:
  - i. Coordination with VA to design user roles, privileges, and other related access.

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- ii. Assessment of existing VA role provisioning, and performance of detailed role mapping workshops/exercises to provision roles to VA users
- iii. Training materials on VA/Cerner roles and the mapping process.
- j. Establishment of a VITAL Advisory Committee to ensure VITAL maintains a relevant, rigorous and (where appropriate) accredited academic program. This committee will be composed of members from VA, Cerner and other industry, medical and academic partners and will be charged with providing a qualified forum from which to obtain guidance and perspective for the institute.

The Contractor shall report status, issues and risks in a Monthly VITAL Status Report covering all efforts described above.

### **Deliverable:**

- A. Enrollment, Completion, and Satisfaction Report
- B. Monthly VITAL Status Report

### **5.2.4 EHRM DESIGN AND BUILD**

The Contractor shall update the enterprise baseline design and build created in PM TO 01 to reflect VA requirements identified through design workshops with VA. This system will be further localized in future task orders around individual site deployment.

The Contractor shall conduct a series of workshops to verify design, and build the enterprise baseline. This will be done through a series of workshops to iteratively design, build, and validate configuration and workflows.

The Contractor shall:

- a. Verify and document the design decisions in a Design Decision Matrix including decisions on whether to adopt or modify MHS GENESIS and/or Model design decisions for solutions implemented by MHS GENESIS as well as solutions that have not been implemented by DOD.
- b. Configure enterprise build for all solutions and demonstrate the configuration and workflows to the EHRM VA Clinical Councils.
- c. Validate EHRM Baseline per Contractor Master Test Plan.
- d. Summarize all changes in a Workflow Configuration Report such that VA can communicate summary of workflow changes to clinicians, users and testers.

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- e. Provide a Configuration Settings Report detailing configurable items and the cost/deployment implications of identifying items as configurable. Identify which items are:
  - i. Enterprise level configurable (enterprise meaning a single configuration for both GENESIS and EHRM like pain scale),
  - ii. Agency wide – meaning GENESIS and EHRM could have separate configuration settings
  - iii. Local – meaning the individual GENESIS or EHRM treating facility decides the configuration setting.
- f. Recommend and implement standardized user position profiles for VA users.
- g. Include training plan and materials on end-user role assignment
- h. Follow the VIP Guide for Major COTS Program Deployment Guide.

The Contractor shall report status, issues and risks in a Monthly EHRM Design and Build Status Report covering all efforts described above.

### **Deliverables:**

- A. Design Decision Matrix
- B. Workflow Configuration Report
- C. Configuration Settings Report
- D. Monthly EHRM Design and Build Status Report

### **5.2.5 ORGANIZATIONAL CHANGE MANAGEMENT**

The Contractor shall execute Change Management Strategy delivered in the PM TO 01 paragraph 5.3.2 and fully support a national organizational change management strategy, planning and resourcing, with execution of activities across the enterprise to support the adoption of EHRM and its associated workflows. The activities will be executed by the Core Contractor Change Management team with support from government teams at every level: national, VISN, and facility level (VAMC, CBOC, etc.). The Contractor change management teams will consist of appropriately trained and credentialed clinicians, change management specialists, project managers, and operations staff who will support OEHRM. Additional change management reachback from the contractor shall be available to provide focused support in addition to the Core Contractor Change Management Unit. The Core Contractor team will work with the OEHRM to establish vision and standards, and plan for the support of VISNs and VAMCs. Using industry-leading change management tactics, the Core Contract Change Management team will enable regional preparation for deployment, and initiate engagement with key stakeholders. The Contractor shall:

- a. Facilitate an Executive Alignment Event at the national level that will establish the vision and guiding principles of the project. In addition, we will support the agreed

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upon project governance, and align leadership to support and lead change throughout the project. Develop the Project Vision Commitment Poster.

- b. Guide identification of Executive Sponsors and Stakeholders, and provide them with the information needed to promote the change with their actions and conversations to increase awareness and desire.
- c. Support site-related kickoff events with specific, targeted change management tactics.
- d. Create and manage integrated master project plan across change management, training, and VITAL coordinated with broader deployment plans.
- e. Engage and support workflow development and associated groups through connecting to best practices and communities.
- f. In coordination with Contractor deployment team, support the business process reengineering team to review current and design updated core clinical and administrative SOPs, which will align with the Contractor's system enterprise design.
- g. Work with the functional governance board and councils to provide change management inputs that support effective governance adherence, communication and monitoring of the governance process.
- h. Create the core Change Management Content and Toolkits, which will then be localized for VISN and VAMC use.
- i. Establish tools and process to identify and track readiness to change and barriers to adoption at large, medium, and small facilities as well as CBOCs and other federal facilities as agreed upon with VA. Collect and analyze human capital data, metrics, and trends resulting in the development of the Change Impact and Readiness Plan.
- j. Launch an effective change management strategy which plans for process, job, accountability, and structure. Identify area for change management optimization and align appropriate contract support team.
- k. Work with the business process reengineering team to identify human impact of modified workflows from core/model to inform change management strategy and approach. Support design decision process with change management and clinical specialist at national level to capture and track configuration options, workflows and processes and score the decisions as high, med, low human impact to inform change management strategy and approach.
- l. Set broad strategic approach, integration, and execution plans for CMO office and related VISN and VAMC levels. Any other efforts around change management should align with the broad strategy to avoid duplication and confusion.
- m. Assess and document change impact readiness to support OEHRM and IOC facility-specific implementation planning, including potential adoption risks to be mitigated in a Change Impact and Readiness Assessment. These activities

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include change management participation in site related activities such as Current State Reviews, where appropriate.

- n. Determine stakeholder and key persona profiles based on role and anticipated impact of implementation and develop communication plans for each stakeholder group. Implement social listening tools to conduct sentiment analysis.
- o. Outline desired cultural attitudes and behaviors and assess the gap from current culture to desired future culture at the national level. Create a plan for action to mitigate identified potential barriers.
- p. Define National Change Management Metrics to measure successful change management at the national and regional level. Track and report metrics to national and regional leadership, and mitigate ongoing issues and risks as they arise.
- q. Identify pain points which may hinder adoption and implement a mitigation plan.
- r. Work with Communication team to ensure consistency and standards in all change management communication artifacts, support development of enterprise (national) communication plan which spans all stakeholder levels, and define standard communication approach.
- s. Inform and adjust, as needed, training plans based on the identified necessary skills and behaviors needed to support the change and document requirements.
- t. Establish Change Agent Network Strategy, including a plan to engage change leadership and change agents at regional and facility level to enable cascading and two-way communication with all impacted staff over the lifecycle of the engagement.
- u. Support VISN, VAMC, CPAC identified change leadership team (CLT) with strategic guidance, logistics and content.
- v. Support section 5.4.1 Roadshows by providing change management expertise, content, messaging and in-person resources to ensure coordination with broader change management plans.
- w. Provide support to address readiness challenges identified in the change impact and site readiness assessment.
- x. Align and support Communication and Value Management Plan and activities

The Contractor shall report status, issues and risks in a Monthly Organizational Change Management Status Report covering all efforts described above.

### **Deliverables:**

- A. Project Vision and Commitment Poster
- B. Change Management Content and Toolkits
- C. Change Impact and Readiness Assessment
- D. National Change Management Metrics
- E. Change Agent Network Strategy

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### **F. Monthly Organizational Change Management Status Report**

#### **5.2.6 TEST AND EVALUATION EXECUTION, SUPPORT AND MANAGEMENT**

The Contractor shall:

- a. Provide support for the VA Test and Evaluation activities related to the services and requirements of this task order including items such as participation in test and evaluation defects/issues process, assistance in troubleshooting/triaging, jointly troubleshooting issues that appear to be development/test environment related, responding to findings from test and evaluation activities.
- b. Provide support to VA Test and Evaluation resources in the creation and provision of test data for test events executed by VA Test and Evaluation. Test data creation and provision within the EHRM system for Contractor test events will be provided by the Contractor.
- c. Provide user/super user training and other training identified as required for the VA Test and Evaluation government and contract resources (which can include subject matter experts/members of the Chief Medical Office teams and user community) to successfully execute test and evaluation activities for the services/products covered in this task order as early as possible in the EHRM baseline preparation and wave planning deployment timelines. To the maximum extent possible, Contractor shall leverage MHS GENESIS training materials that are applicable in areas such as EHRM system functionality common to VA and DoD to provide training as early as possible. Training will include coverage of capabilities/functions that are unique to VA, for example registration/eligibility/enrollment functions.
- d. Provide an overview and demo of the Contractor's Domains/Environments and Configuration Tools to the Test and Evaluation resources. Presentation will describe the tools, processes and procedures used to configure and interface/integrate to the EHRM. Any overview materials will be provided to VA.
- e. Allow time between the final end-to-end testing and the code freeze for VA staff to validate workflows and fixes in comprehensive manner.
- f. As applicable to the services/products in this task order, participate in the Test & Evaluation Governance which includes the End to End Domains/Test Environments configuration management/change control and test event tracking processes in coordination with the government in regard to the Cerner pre-production domains VA BUILD and INT as these domains may have multiple teams working simultaneously within the environments/domains. The Governance will be implemented to mitigate conflicts with testing activities, training and scheduled deployments for both the VA and DoD.

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- g. Support compliance reviews such as Section 508 compliance review as required by VA and shall compile data for VA submission compliance reviews and respond to request for changes resulting from those reviews, as necessary.

The Contractor shall report status, issues and risks in a Monthly Test and Evaluation Status Report covering all efforts described above.

### **Deliverables:**

- A. Overview and demo of domains, environments and configuration tools
- B. Monthly Test and Evaluation Status Report

### **5.3 VALUE MANAGEMENT**

The Contractor shall execute the tasks defined in the Value Realization Strategy developed under PWS paragraph 5.3.7 of the PM TO 01. The Value Realization Strategy is updated monthly by the Contractor as required by the PM TO 01. Additional activities added to these plans and strategies during the period of performance may be deemed by the parties to be outside of the originally contemplated scope, and may coordinate with VA on using Optional Task 5.5.

The Contractor's value management and realization model provides a structured framework, alignment and support to define, drive, and deliver a set of VA EHRM improved outcomes and strategic priorities. The value realization model and framework leverages a data-driven and continuous performance improvement approach that is holistic, systematic and collaborative to drive measurable, sustainable and scalable change throughout the organization. The Contractor shall work with key VA national leadership and stakeholders to define national value priorities, goals, objectives, measurements, and project success factors and initiate engagement with VISN leadership to communicate and prepare for national value focused priorities.

The Contractor shall define and report against a broad set of metrics and Key Performance Indicators (KPIs) that are tiered across measurement categories of clinical quality, safety, operational, adoption and EHRM user satisfaction. The Contractor shall collect, analyze, baseline, monitor and report on National EHRM Program and VISN metrics during IOC Deployment. As part of this TO, the Contractor shall analyze data and workflow processes to report trends and progress toward EHRM value measurement goals, with identified areas for improvement and mitigation strategies. The value measurement reporting process is an ongoing and iterative approach that includes review with appropriate EHRM governance infrastructure and VISN leadership to facilitate reporting against KPIs and metrics to ensure business and clinical operations are tracking at or above pre-conversion levels.



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The Contractor shall report status, issues and risks in a Monthly Value Management Status Report covering all efforts described above and in supporting tasks 5.3.1 and 5.3.2 below.

### **Deliverable:**

- A. Monthly Value Management Status Report

### **5.3.1 NATIONAL VALUE PLANNING**

The Contractor shall conduct the following value planning tasks to identify key focus areas for measurement and communication of value achieved throughout the EHRM implementation. All value planning activities require VA collaboration, input, and agreeance:

- a. Define and establish National and VISN key stakeholder and Value governance to review and sustain the set of value based priorities, measurement strategies, and communication throughout the life of the EHRM project.
- b. Conduct an in-depth onsite review of current state workflows and risks and opportunities across the continuum at the IOC sites, with particular attention on value priorities at the VAMC level and reporting needs.
- c. Facilitate a National Leadership Value Planning Event to establish agreement on project outcome priorities, at the national level, for quantifying value from the EHRM deployment by supporting the following actions, all to be documented within a Value Charter:
  - i. Establish value objectives, including definition of key drivers, supporting success factors, and measurable key performance indicators (“KPIs”).
  - ii. Highlight feedback and insight gained during VAMC Current State Review, as well as priorities discussed during National Executive Alignment event.
  - iii. Gain executive-level buy in from key stakeholders in attendance.
  - iv. Initiate communication planning for continued Value Strategy throughout the EHRM project.
  - v. Introduce the Value Plan and establish next steps.
    - 1. Establish accountable owners for each priority, as well as executive champion.
    - 2. Initiate baseline measurement, benchmarking, and data collection strategies.
    - 3. Review iterative process for measuring, documenting, and reporting Value.
- d. Develop an Enterprise Value Plan based upon the stated value objectives established during the National Leadership Value Planning Event. The Value Plan will document each Value Objective with appropriate context to the VA

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EHRM project, as well as define specific clinical workflows, EHRM solutions, and measurable KPIs, or metrics, that will impact the outcomes of value reporting following EHRM deployment. The Contractor shall create Value Plans for up to five stated VA Value strategic priorities, which are aligned to specific measurements of success. Value categories may include the following, but may change based on work completed in the above phases of the Value Planning processes:

- i. Access To Care
  - ii. Clinical Quality & Safety
  - iii. Veteran Experience
  - iv. Care Team Efficiencies
  - v. Clinical and Business operations
- e. Following enterprise Value Planning, the Contractor shall conduct a VISN Value Planning event to include communication of defined and agreed upon enterprise value priorities and plans. This event will gather specific input from VISN leadership to define and document additional value objective needs beyond those stated as national priorities; value priorities stated at the VISN level will come from VISN specific high priority measurement and reporting needs and become a VISN Value Plan addendum to the enterprise-wide Value Plans.
- f. The Contractor will utilize a set of Performance Improvement tools and processes to enable a culture of continuous improvement across VA enterprise to support achievement of measurable value aligned to Cerner capabilities and overall strategic outcomes. Such practices and tools may include the following:
  - i. Value Charter and plan documentation
  - ii. Process waste analysis
  - iii. Performance data analysis, baselining, benchmarks, and target definition
  - iv. Root cause analysis
  - v. Risks and barriers
  - vi. Stakeholder analysis
  - vii. Communication planning
  - viii. Data validation processes

### **Deliverables:**

- A. Value Charter document
- B. Enterprise Value Plans
- C. VISN Value Plan addenda

### **5.3.2 NATIONAL VALUE MANAGEMENT REPORTING**

The Contractor shall report the Value realized from the EHRM deployment as outlined in the following tasks:

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- a. Compile all components of Value Planning activities, including delivery of both the Value Charter and Value Plans, into a documented format.
- b. Compile a List of KPIs and Metrics that will be tracked across such categories of clinical quality, safety, operational, adoption and EHRM user satisfaction
- c. Assist enterprise, VISN, and VAMC stakeholders with collecting appropriate current state baselines for the agreed upon value priorities within the Value Plans.
  - i. Provide metric definitions to support baseline data collection, where appropriate.
  - ii. Document available, mutually agreed upon, and validated baselines, as well as communicate known gaps
- d. Maintain data sets utilized for trending of individual metrics defined within the Value Plan(s) and update data visualization tools as appropriate (e.g. dashboards).

### **Deliverables:**

- A. List of KPIs and Metrics

## **5.4 EHRM STAKEHOLDER COMMUNICATIONS**

The Contractor shall execute the tasks defined in the Stakeholder Communication Strategy and Plan developed under PWS paragraph 5.3.4 of the PM TO 01. The Stakeholder Communication Strategy and Plan is updated monthly by the Contractor as required by the PM TO 01. Additional activities added to these plans and strategies during the period of performance may be deemed by the parties to be outside of the originally contemplated scope, and may coordinate with VA on using Optional Task 5.5.

The Contractor shall support:

- a. External Communications: Support the coordination and development of project communications artifacts tailored to external stakeholders (e.g., any publicly consumable media outlet).
  - i. Provide input and subject matter experts to support the development of program content direction and content input for VA-owned web content, blogs, videos, etc.; hosted on .gov channels and those run by third-party media, industry groups, etc.
  - ii. Advise on program public relations, industry engagement, media interaction, and crisis mitigation strategies
- b. VA EHRM Implementation: Develop communications artifacts in support of the Change Management, Value, Training and Deployment teams to communicate program information at the national, regional and local levels. Provide OEHRM leads with communications support and develop artifacts to include (but not limited to) presentations, newsletter content, posters, and key messages.

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- i. Communications artifacts shall be pre-determined by the events that occur as part of the Contractor's implementation methodology and are considered planned communications cycles. In addition to the planned communications cycle artifacts, the Contractor shall develop communications artifacts to support the local and national engagement efforts.
  - ii. National efforts include the legislative or programmatic reporting through the VA, CMO, PMO, CTO engagements on behalf of their EHRM role
  - iii. Formal communications artifact requests will be submitted to the Contractor using and approved request process.
- c. Internal Communications: Support the coordination and development of project communications artifacts tailored to internal stakeholders (e.g., VISNs, facilities, National Program Offices) that supports socializing/educating internal stakeholders.
  - i. Provide staff and content that can be shared with sites not part of IOC.
  - ii. This communication can be linked to Change Management, Training and Communications Strategy for EHRM.
- d. Events: Work with EHRM stakeholders to coordinate and support events, at the request of the VA. Events include product/solution demonstrations, roadshows, conference exhibitions, speaking engagements, etc. Develop communication artifacts to support said event, including presentations, collateral, demo prep, etc. The Contractor shall coordinate and track event logistics, attendees, prep calls and agendas. Formal event requests will be submitted to the Contractor using an approved request process.
- e. Develop and maintain a communications catalog to track and store all products produced

The Contractor shall report status, artifacts and work products produced, issues and risks in a Monthly Communications Status Report covering all efforts described above.

### **Deliverable:**

- A. Monthly Communications Status Report

### **5.4.1 DEVELOP CONTENT AND CONDUCT ROADSHOWS**

The Contractor shall support roadshows consisting of a high-level demo, discussion of site review and deployment activities, current activities occurring in OEHRM and a Question and Answer (Q&A) opportunity for the VA/Cerner facilitators engage with the participants in each section. Roadshow materials and content require VA approval prior to dissemination. VA anticipates no more than 19 roadshows shall occur throughout the

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PoP of this contract. The Contractor shall support virtual and recorded roadshows for VISN members unable to attend in person. The Contractor shall conduct a Post-Roadshow Assessment to determine any modifications required to content, and document Q&A activities for feedback to the communications and change management teams.

The Contractor shall report status, issues and risks in a Monthly Roadshow Status Report covering all efforts described above.

### **Deliverables:**

- A. Roadshow content
- B. Virtual and Recorded Roadshow Capability
- C. Post-Roadshow Assessment
- D. Monthly Roadshow Status Report

### **5.5 ADDITIONAL FUNCTIONAL SUPPORT (OPTIONAL TASK)**

Throughout the PoP, there may be additional functional baseline activities identified requiring analysis, design, development, testing, release and/or deployment. This additional functional support may be required within the overall PWS PoP to include the base and option period. This optional task may be exercised multiple times during the base and option period up to the established CLIN ceiling, which will consist of negotiated labor categories and hours established at the Task Order level. Optional tasks executed through the below process will exercise labor categories and hours from the established ceiling.

VA may exercise the optional task upon written notification from the Contracting Officer. This option may be utilized to obtain tasks as described in PWS sections 5.2 through 5.5. VA will provide a description of the required functionality. The Contractor shall provide VA with a written proposal detailing the approach, and resources utilizing the negotiated ID/IQ labor categories and hours. VA will perform an analysis to determine if the proposed technical approach is reasonable.

### **5.6 OPTION PERIOD**

All requirements defined in PWS Sections 5.1 through 5.5 and subparagraphs shall be performed in the option period.

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### 6.0 GENERAL REQUIREMENTS

#### 6.1 PERFORMANCE METRICS

The table below defines the Performance Standards and Acceptable Levels of Performance associated with this effort. The Government may also utilize the commercially available and VA-specific Key Performance Indicators (KPIs) and Service Level Agreements (SLAs) defined at the ID/IQ level to measure performance under this TO, as applicable.

Performance Objective	Performance Standard	Acceptable Levels of Performance
A. Technical / Quality of Product or Service	<ol style="list-style-type: none"><li>1. Shows understanding of requirements</li><li>2. Efficient and effective in meeting requirements</li><li>3. Meets technical needs and mission requirements</li><li>4. Provides quality services/products</li><li>5. Meets performance thresholds/metrics defined in applicable Service Level Agreements</li></ol>	Satisfactory or higher
B. Project Milestones and Schedule	<ol style="list-style-type: none"><li>1. Quick response capability</li><li>2. Products completed, reviewed, delivered in accordance with the established schedule</li><li>3. Notifies customer in advance of potential problems</li></ol>	Satisfactory or higher
C. Price & Staffing	<ol style="list-style-type: none"><li>1. Currency of expertise and staffing levels appropriate</li><li>2. Personnel possess necessary knowledge, skills and abilities to perform tasks</li></ol>	Satisfactory or higher
D. Management	<ol style="list-style-type: none"><li>1. Integration and coordination of all activities to execute effort</li></ol>	Satisfactory or higher

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The COR will utilize a QASP throughout the life of the TO to ensure that the Contractor is performing the services required by this PWS in an acceptable level of performance. The Government reserves the right to alter or change the QASP at its own discretion. A Performance Based Service Assessment will be used by the COR in accordance with the QASP to assess Contractor performance.

### **6.2 SECTION 508 –INFORMATION AND COMMUNICATION TECHNOLOGY (ICT) STANDARDS**

All requirements in Sections 8.10, including subparagraphs, of the EHRM Basic PWS apply to this effort. Deliverable requirements are further defined in the following subparagraphs. The Contractor shall comply with the technical standards at: <https://www.access-board.gov/guidelines-and-standards/communications-and-it/about-the-ict-refresh/final-rule/single-file-version>

#### **6.2.1 REPRESENTATION OF CONFORMANCE**

The Contractor shall provide a Section 508 Subject Matter Expert lead for VA EHRM 508 resources to work with. The Contractor shall adhere to the VA-approved Section 508 Test and Delivery Plan and Section 508 Accessibility Roadmap delivered under TO 0002. The Contractor shall update the Government Product Accessibility Template (GPAT) and/or Voluntary Product Accessibility Template (VPAT) delivered under TO 0002 to indicate the level of Section 508 conformance as updates are made to its products and/or services to ensure and sustain 508 compliance.

The Contractor shall work closely with VA Section 508 representatives to verify Section 508 conformance of its products and/or services.

#### **6.2.2 ACCEPTANCE AND ACCEPTANCE TESTING**

The Contractor shall provide Final Section 508 Compliance Test Results. The Section 508 Test Results shall include a GPAT/VPAT Conformance Statement validating conformance to Section 508 Refresh Success Criteria and Conformance Requirements for already-developed ICT deliverables.

The Final Section 508 Test Results shall be reviewed and approved by VA Section 508 representatives to validate conformance to Section 508 Refresh Success Criteria and Conformance Requirements for ICT deliverables.

For software development for VA interfaces/systems, the Contractor shall prepare and submit a Section 508 Conformance Validation Package with content as outlined in VA Process Asset Library, Software Development Product Build process map.

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The Section 508 Conformance Validation Package shall be reviewed and approved by VA Section 508 representatives to validate conformance to Section 508 Refresh Success Criteria and Conformance Requirements for ICT deliverables.

Automated test tools, manual techniques, and checklists are used in the VA Section 508 compliance assessment.

### **Deliverable:**

- A. Final Section 508 Compliance Test Results for ICT Deliverables
- B. Section 508 Compliance Validation Package for ICT Deliverables

### **6.3 SHIPMENT OF HARDWARE OR EQUIPMENT**

Not applicable.

### **6.4 ENTERPRISE AND IT FRAMEWORK**

Not applicable.

### **6.5 ORGANIZATIONAL CONFLICT OF INTEREST**

All functions related to Acquisition Support shall be on an advisory basis only. Please be advised that since the awardee of this Task Order will provide systems engineering, technical direction, specifications, work statements, and evaluation services, some restrictions on future activities of the awardee may be required in accordance with FAR 9.5 and the clause entitled, Organizational Conflict of Interest, found in Section H of the EHRM basic contract. The Contractor and its employees, as appropriate, shall adhere to the corporate-level Non-Disclosure Agreement signed under PM TO 01.



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### **CONTRACTOR EMPLOYEE PERSONAL FINANCIAL INTEREST/PROTECTION OF SENSITIVE INFORMATION AGREEMENT**

This Agreement refers to Contract/Order \_\_\_\_\_ entered into between the Department of Veterans Affairs and \_\_\_\_\_ (Contractor).

As an employee of the aforementioned Contractor, I understand that in connection with my involvement in the support of the above-referenced Contract/Order, I may receive or have access to certain “sensitive information” relating to said Contract/Order, and/or may be called upon to perform services which could have a potential impact on the financial interests of other companies, businesses or corporate entities. I hereby agree that I will not discuss or otherwise disclose (except as may be legally or contractually required) any such “sensitive information” maintained by the Department of Veterans Affairs or by others on behalf of the Department of Veterans Affairs, to any person, including personnel in my own organization, not authorized to receive such information.

“Sensitive information” includes:

- (a) Information provided to the Contractor or the Government that would be competitively useful on current or future related procurements; or
- (b) Is considered source selection information or bid and proposal information as defined in FAR 2.101, and FAR 3.104-4; or
- (c) Contains (1) information about a Contractor’s pricing, rates, costs, schedule, or contract performance; or (2) the Government’s analysis of that information; or
- (d) Program information relating to current or estimated budgets, schedules or other financial information relating to the program office; or
- (e) Is properly marked as source selection information or any similar markings.

Should “sensitive information” be provided to me under this Contract/Order, I agree not to discuss or disclose such information with/to any individual not authorized to receive such information. If there is any uncertainty as to whether the disclosed information comprises “sensitive information”, I will request my employer to request a determination in writing from the Department of Veterans Affairs Contracting Officer as to the need to protect this information from disclosure.

I will promptly notify my employer if, during my participation in the subject Contract/Order, I am assigned any duties that could affect the interests of a company, business or corporate entity in which either I, my spouse or minor children, or any

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member of my immediate family/household has a personal financial interest. "Financial interest" is defined as compensation for employment in the form of wages, salaries, commissions, professional fees, or fees for business referrals, or any financial investments in the business in the form of direct stocks or bond ownership, or partnership interest (excluding non-directed retirement or other mutual fund investments). In the event that, at a later date, I acquire actual knowledge of such an interest or my employer becomes involved in proposing for a solicitation resulting from the work under this Contract/Order, as either an offeror, an advisor to an offeror, or as a Subcontractor to an offeror, I will promptly notify my employer. I understand this may disqualify me from any further involvement with this Contract/Order, as agreed upon between the Department of Veterans Affairs and my company.

Among the possible consequences, I understand that violation of any of the above conditions/requirements may result in my immediate disqualification or termination from working on this Contract/Order pending legal and contractual review.

I further understand and agree that all Confidential, Proprietary and/or Sensitive Information shall be retained, disseminated, released, and destroyed in accordance with the requirements of law and applicable Federal or Department of Veterans Affairs directives, regulations, instructions, policies and guidance.

This Agreement shall be interpreted under and in conformance with the laws of the United States.

I agree to the Terms of this Agreement and certify that I have read and understand the above Agreement. I further certify that the statements made herein are true and correct.

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Signature and Date	Company
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Printed Name	Phone Number
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